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General Information

- 1. *Question: How will decisions be made on which MCO an individual is assigned to?*Answer: At the time of application, the individual can choose their MCO by making a selection on the application. If a selection is not made, the individual will be assigned to an MCO based on the state's algorithm. After enrollment in the plan, the individual has 90 days to change plans, if they choose.
- 2. Question: Will a child eligible for CHIP (Children's Health Insurance Program) also have a MCO issued health care card?

Answer: Yes Note: CHIP is currently known in Kansas as HealthWave. After January 1, 2013 the program will be known as KanCare.

- 3. Question: Will an individual moving between Medicaid eligibility types have the ability to choose a new MCO each time if they want?
 - Answer: No. Assignments can only be changed during open enrollment, unless the individual qualifies for one of the good-cause reasons.
- 4. Question: When an individual changes eligibility types, does the system know that they are not a newly eligible person to prevent them from being reassigned?

 Answer: Yes.
- 5. Question: Who has the ability to have a child reassigned?
 Answer: The child's caretaker makes the decision about which MCO the child is assigned to. This would be the casehead (PI) on KAECSES. For children in the custody of the State (DCF or JJA) see: Question lunder the topic of Children in the Custody of the State.
- 6. Question: What will happen with Native American individuals whose families have opted out of KanCare?
 - Answer: Initially, these individuals follow the same assignment process as outlined above in Question 1, but they have the ability to opt out of managed care. This includes the children in the custody of the Tribal Authority. If they choose to opt out, the individual will not receive the additional Value Added Services provided by the MCOs. Claims would be paid on a Fee for Service basis. Individuals wishing to opt out must contact the HP Managed Care Enrollment Center at 1-866-305-5147. A copy of the tribal documentation is required. *Note:* Children eligible for CHIP cannot opt out of KanCare.
- 7. Question: What is the difference between the enrollment packet and welcome packet?

 Answer: The enrollment packet comes from the fiscal agent, HP and the welcome packet comes from the assigned MCO. The enrollment packet contains information about the three MCOs and provides instructions if the individual wishes to change their MCO. The welcome packet includes the medical card and informational material about the specific MCO.
- 8. Question: How does the selection of a Primary Care Physician(PCP) relate to the 90 day window to make a change?.

Answer: The PCP can be changed at any time with coordination with the MCO provider. The 90 day "window" correlates with the open enrollment for MCO choice.

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9. Question: There is a Medicaid liaison at each DCF office that we call today about eligibility switches and with any billing issues. Will this continue?

Answer: There is a Medicaid liaison assigned to each of the regions. They can assist with billing issues. They do not determine eligibility.

General MCO (Managed Care Organization)/ PCP (Primary Care Physician)

1. Question: How will monitoring of the MCOs occur?

Answer: There are significant federal and state mandated monitoring requirements of MCOs. In addition to these activities that the state will be performing, the state has created pay for performance mechanisms in the KanCare contract with the MCOs. See details in attachment J of the RFP which can be located on the KanCare website.

2. Question: Several of the MCOs are circulating contracts for signature that have not been updated. What should agencies do in response?

Answer: If the contract is incorrect, discuss this with the MCO. If you are still not satisfied, please bring this to the State's attention. KDADS providers should contact Kim Brown at kim.brown@kdads.ks.gov or 785-296-6754.

3. Question: Do the MCOs or the state set the payment rates?

Answer: The state sets the minimum rate.

4. *Question: Is there a caseload that the MCOs will be expected to meet?*

Answer: MCOs are responsible to provide coordination of care for all members. MCOs have various staff that will support this effort such as care coordinators, member service advocates, and peer support workers. Different people/situations require different levels of care coordination; therefore it is difficult to assign an exact ratio of care coordinators to members. MCOs are responsible to ensure each member receives the appropriate care coordination they need.

Mental Health/Mental Health Services/KDADS (Kansas Department for Aging and Disability Services)

1. Question: Who is responsible for the safety of the child in a mental health crisis? Answer: Everyone who works with the child is responsible for the safety of the child.

2. Question: Will MCOs be able to do quick turnarounds for children needing crisis care?

Answer: There is no prior-authorization for emergency care. The MCOs have a mental health crisis access standard which they must meet.

3. Question: Will the Community Mental Health Centers (CMHCs) continue to be responsible for the SED Waiver?

Answer: Yes, CMHCs will continue to screen for clinical eligibility for the SED waiver as well as providing the waiver specific services.

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4. Question: Will rates for behavioral health services be the same?

Answer: They will be at the same rate today, unless the provider has negotiated a higher reimbursement rate with the MCO.

5. Question: Who will be doing the screening for impatient hospitalizations?

Answer: The CMHC will continue to do inpatient psychiatric hospitalization screenings and the screening for Psychiatric Residential Treatment Facilities (PRTFs).

6. Question: What about when a kid is with their parents and becomes institutionally Medicaid eligible solely because they have been admitted to the PRTF and the family may have been HealthWave eligible before?

Answer: They will stay with the same MCO.

7. Question: Will PRTF rates continue to be renewed and updated every 6 months?

Answer: Yes

8. Question: Is the PRTF waiver still in place or has that run out?
Answer: PRTF Community Based Alternative grant expired on September 30, 2012

9. Question: What will joint management by KDADS and KDHE look like?

Answer: There will be interagency KanCare monitoring teams which will monitor contracts and coordinate interagency over sight and monitoring activities.

Children in the Custody of the State (DCF or JJA) / Foster Care

- 1. Question: When foster care youth are assigned a card as they come into custody, here are the questions related to that:
 - a. How will decisions be made on which MCO a child is assigned to?
 - b. Who does the packet get sent to?
 - c. Who can make the MCO change?
 - d. If a child comes into custody and has existing Medicaid or CHIP coverage, do they maintain the MCO they already have?

Answer:

- a. If the child entering foster care is already assigned to a MCO, they will stay with the MCO. If the child entering foster care has had KanCare eligibility in the previous 60 days, they will be reassigned to the previous MCO. If neither of the above are true, the child will be assigned to an MCO based on the state's algorithm. During open enrollment the child would be eligible for a change in the MCO assignment. Only DCF or JJA staff may make this change.
- b. Both the enrollment and welcome packet are sent to the placement. Mailings will go to the placement name and address that is entered on the FCPD screen in KAECSES. Even though the enrollment packet is sent to the placement, the placement is not authorized to change the MCO assignment. If the placement attempts to change the MCO, either by submitting the enrollment form or placing a call to the Managed Care Enrollment Center, the MCO change will be denied.
- c. Only DCF or JJA are authorized to make a change. The Child Welfare provider or placement must submit their request to DCF/JJA who will decide if the child's MCO can be changed.
- d. If the child entering foster care is already assigned to a MCO, they will stay with the MCO.

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2. Question: If a child is on Medicaid/CHIP and enter into foster care, will they need a new card like today?

Answer: When a child enters foster care there are only two (2) situations in which the placement would receive a new plastic medical card:

- If the child is not known to the system
- If the prior holder of the plastic medical card has lost it or refuses to supply it to the social worker when the child enters foster care. The eligibility specialist will need to look at MMIS to see who the current MCO is and a new card must be requested through the MCO. If a duplicate card is needed after the child enters foster care the placement provider will need to contact the MCO to request a duplicate card.
- 3. Question: If a child comes into care and their family doesn't have Medicaid how will that child be assigned?

Answer: The child will be assigned to an MCO based on the state's algorithm.

4. Question: How will case management be coordinated between DCF, Contractors and MCO case managers? Who trumps who?

Answer: The case management coordination will be based upon the child's needs.

5. Question: For kids whose parents' rights are intact we may work with the parent on determining what is the best MCO choice. If the parent won't cooperate and a change is believed to be needed how would it be changed?

Answer: If the child is in DCF custody and in an out of home placement, only DCF can make the request to change an MCO assignment. If the child is residing with their parent(s), the parent is authorized to make the decision about MCO assignment.

- 6. Question: If parental rights are terminated would DCF need to make the decision or could the Child Welfare Contractor make the decision to switch MCOs?
 - Answer: The Child Welfare Contractor is not authorized to make the request for a change in the MCO assignment. Only DCF staff can make the request to change the MCO assignment.
- 7. Question: If a foster child is placed with a relative or foster home out of the state and continues to be eligible for KanCare how will their medical care be paid for?
 - Answer: The placement MUST work with the MCO to locate a provider in the state where the child resides. The MCO is still responsible for providing coverage for the child and will be able to pay out of network if necessary.
- 8. Question: When parental rights are terminated and the child is placed for adoption, the adoptive parents upon signing the APA should be able to request the MCO of their choice. Can this be placed on the Good Cause list?
 - Answer: No. Until the adoption is finalized the child is still in the custody of DCF. Only DCF can make the request to change the MCO assignment. After the adoption is finalized, the adoptive parents can file an appeal to change the MCO assignment.
- 9. Question: When a child leaves foster care and returns home what happens to the plastic card and eligibility?

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Answer: The plastic medical card needs to be sent home with the child. The child will no longer be eligible for foster care medical. The parents *must* apply for medical coverage, just as they do today. A new eligibility determination *must* be completed based on the current circumstances.

- 10. Question: Working with families around reintegration can be hard if families don't have Medicaid. Will MCOs be willing to add services that expedite reunification?

 Answer: When the child is reintegrated with the parent, the child is no longer eligible for foster care Medicaid and the parent MUST apply for medical coverage. This is the same process today and will continue with KanCare. The MCO is focused on improving overall health outcomes for Kansas families. The state is not limiting what additional services the MCO can provide.
- 11. Question: How can young people aging out of custody change their MCO?

 Answer: They need to be part of the discussion during open enrollment period prior to their release from foster care so they can assist in choosing their MCO. Once they are assigned to an MCO they cannot change the MCO assignment until open enrollment. Like anyone who is under managed care, they can request to appeal the MCO assignment.